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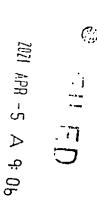
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COVER LETTER

TO:

Registration Section

Division of Corporations Waldo's Sports Collectibles LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael R Hosking Name of Person Waldo's Sports Collectibles LLC Firm/Company 8900 NW 77th Ct Apt 122 Address Tamarac FL 33321 City/State and Zip Code Rehosk1955@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 591-1277 Michael Hosking Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee. ☐ \$55.00 Filing Fee & \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: **Mailing Address:** Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Waldo's Sports Collectibles LLC						
(<u>Name of the Limited Liabili</u> (A Florida	lity Company a la Limited Liab	s it now appe lity Company	ars on our reci	ords.)		
The Articles of Organization for this Limited Liability C Florida document number L21000122876	Сотрапу we 	re filed on $\frac{0}{2}$	3/15/2021		and assig	ned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lim	nited liability	company l	<u>here</u> :			
The new name must be distinguishable and contain the words "Lim	nited Liability (Company," the	designation "L	LC" or the abbi	eviation "L.L.	C."
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDI	RESS) _					<u>-</u>
	_					
Enter new mailing address, if applicable:	_		·			
(Mailing address MAY BE A POST OFFICE BOX)	_					
	_			· · · · · · · · · · · · · · · · · · ·	····	
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:		ress on our	records, <u>ent</u>	er the name	of the new	registere
New Registered Office Address:		Fnter Fi	orida street ada	lress		
		City		Florida	Zip Code	-(7)
New Registered Agent's Signature, if changing Registere	ed Agent;					_
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	t and agree complete pe agent as pro red office ad	rjormance e vided for in	oj my auucs, Chapter 60	ana i am ja 5, F.S. Or, ij	mugy wun This docum	ana i ent is
	If Changin	g Registered A	Agent, Signatu	re of New Regis	stered Agent	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael R Hosking	8900 NW 77th Ct	□Add
		Apt 122	
		Tamarac, FL 33321	Change
AMBR Mi	Michael R Hosking	8900 NW 77ւհ Cւ	= Add
		Арт 122	Remove
		Tamarac, Fl 33321	□ Change
		<u> </u>	
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ective date, if other than the effective date is listed, the date in	e date of filing:ust be specific and cannot be prior to	o date of filing or more than 90	(optional) days after filing.) Pu	irsuant to 605.020
te: If the date inserted in this	ust be specific and cannot be prior to block does not meet the applica	ble statutory filing requiren	nents, this date wil	I not be listed a
ument's effective date on the	Department of State's records.			21 .
				APR
cord specifies a delayed effect s filed.	ive date, but not an effective tin	ne, at 12:01 a.m. on the ear	lier of: (b) The 9	0th day after the ப
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March 31	2021		•	
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	1/12		•	90
	Signature of a member or author	rized representative of a memb	oer	//
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Filing Fee: \$25.00